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	E ADDRESS (Note: Use Block 1 for	any change of address)		Note: A certificate of mailing can only be used for domestic mailings of th Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
BACON & THOMAS, PLLC 625 SLATERS LANE FOURTH FLOOR ALEXANDRIA, VA 22314  MAR 0			I hereby certify that states Postal Service addressed to the Matransmitted to the US		ertificate of Mailing or Transmission this Fee(s) Transmittal is being deposited with the Unite with sufficient postage for first class mail in an envelop all Stop ISSUE FEE address above, or being facsimil PTO (571) 273-2885, on the date indicated below.	
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	-					(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/781,720	02/20/2004	Masanori		i Tomioka	TOMI3002/FJD	4171
TITLE OF INVENTION: TONE WHEEL TESTING APPARATUS AND ITS				IETHOD	,	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	03/08/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS	1	•
JACKSON, TYRONE D		2862		324-174000	•	
CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 c Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless	ion (or "Fee Address" Indica or more recent) attached. Use RESIDENCE DATA TO B an assignee is identified be	Correspondence  ation form of a Customer  E PRINTED ON To	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.			
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE 3/18/2/2018/11/25/11/20						
Uchiyama Manu	facturing Corp.	3	38, Enai	mi, Okayama-æhiር በ	01 Bayama, Japan	1400.00 OP 300.00 OP
lease check the appropriate	assignee category or categor	ries (will not be pri	inted on the p	oatent): 🔲 Individual 🗶 C	orporation or other private gr	oup entity Governmen
a. The following fee(s) are on the following fee(s) are on the fee (S) are on the fee (No s) are of the fee (N	mall entity discount permitte	ed)	☐ Payment	Fee(s): in the amount of the fee(s) is ending to the amount of the fee(s) is ending to the fee(s) is ending to the feet of the	8 is attached, any defici	iency credit any overpayment, to opy of this form).
	(from status indicated above MALL ENTITY status. See 1	)		cant is no longer claiming SMA		
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Authorized Signature	DHAD (In	hour			arch 8, 2006	

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25,721